

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> ARREGUIN FOR STATE SENATE DISTRICT 7 2024; JESSE			<b>Date of This Filing</b> 04/20/2023  <b>Report No.</b> 3  <input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)  <b>No. of Pages</b> 2	<b>Date Stamp</b>          <b>Page 1 of 2</b>	<b>CALIFORNIA FORM 497</b>  For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (510)885-4536	<b>I.D. NUMBER</b> (if applicable) 1458186				
<b>STREET ADDRESS</b>					
<b>CITY</b> ALAMEDA	<b>STATE</b> CA	<b>ZIP CODE</b> 94501			

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
04/20/2023 - 04/20/2023	Western States Council of Sheet Metal Workers Political Action Committee Sacramento, CA 95814  ID# 851706	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		\$10,900.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Reason for Amendment:

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<b>STREET ADDRESS</b>					
<b>CITY</b> ALAMEDA	<b>STATE</b> CA	<b>ZIP CODE</b> 94501			

## Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment: